Business Card Order Form



Leading Health Care In The 21st Century

Jonathan H. Doe

Vocational Rehabilitation Specialist

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Bath, NY 14810 Jonathan. Doe@med.va.gov

Visit Our Network Web Site http://www.va.gov/visns/visn02/

For 24 Hour Patient Care Information

Call Telcare Toll-Free 1-888-838-7890

Please PRINT CLEARLY the following information that will appear on your business card. (First five boxes are standard information.)

	ĺ		
	Name		
Price Guide (Circle quantity requested)	Title		
250\$30	Facility		
500 \$35 1,000 \$39	Street Address		
1,500 \$43	City, State, Zip		
		UP TO three lines of information can b INFORMATION MAY VARY	oe added to the lower right corner. , but recommended items include:
		Phone	
		Fax	
	E-mail Address		

- 1. Printing requests are approved by, and sent through your local Care Line Manager.
- 2. After your order is typeset, you will receive a proof via MS Exchange for your approval. Please make sure all words and numbers are spelled and entered correctly. Please return the proof promptly.
- 3. Please allow 2-4 weeks for delivery after approval of final proof. Shipping will be to above unless otherwise indicated.
- 4. **FAX** completed form to: **(607) 664-4893**

OR mail to: Network Print Shop

VA Healthcare Network Upstate New York at Bath MS/137/78/112, Bath, NY 14810

Network Print Shop Contact Information

Kathleen Laughlin, Richard Carpenter, Print Management Specialists

Phone: (607) 664-4851 or (607) 664-4852

Fax: (607) 664-4893

E-Mail: visn2printshop@med.va.gov

Intranet: http://vaww.visn2.med.va.gov/bath/graphicarts/index.html

Billing Information	
Care Line/Service Line:	Date:
CL/SL Manager's Signature:	
Bill to: (Name and FCP)	

